Effective October 1, 2001														
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			B				R	ATE	FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			g minus 20=		• 6		×	X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			2 minus 3 =		. 0		×	42=		OR	X84=			
MULTIPLE DEPENDENT CLAIM PRESENT						1,	40=		OR	+280=				
* If the difference in column 1 is less than zero, enter						r "0" in column 2				OR	TOTAL	740		
CLAIMS AS AMENDED - PART (Column 1) (Column						(Column 3) SMALL ENTITY				OR	OTHER SMALL	THAN		
		CLAIMS		HIGH		(Coloniii o)			ADDI-	1 1		ADDI-		
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVI	BER OUSLY FOR	PRESENT EXTRA	. R	ATE	TIONAL		RATE	TIONAL FEE		
	Total	. 20	Minus	** 6	20	=	X	9=		OR	X\$18=			
	Independent	. 2	Minus	***	3	-	×	42=		OR	X84=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	40=.		OR	+280=			
								TOTAL T. FEE		OR	TOTAL	/		
,										10.,	ADDIT. FEE	/		
		(Column 1)		(Colu	mn 2) Rest	(Column 3)			1			4001		
AMENDMENT B	·	REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=	×	9=		OR	X\$18=			
	Independent	*	Minus	***	- 0: 414.4	<u> -</u>	×	42=		OR	X84=			
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	40=		or	+280≠			
								TOTAL		OR	TOTAL			
(Column 1) (Column 2) (Column 3)								T. FEE		•	ADDIT, FEE			
		(Column 1) CLAIMS			HEST	(CONDINITO)]		ADDI-	1		ADDI-		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVI	ABER OUSLY FOR	PRESENT EXTRA	R	ATE	TIONAL FEE		RATE	TIONAL FEE		
	Total	*	Minus	**		E	×	9=		OR	X\$18=			
	Independent	*	Minus	***		<u> - </u>	×	42=		OR	X84=			
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						 							
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 								40=	·	OR	+280=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												L		
***	If the "Highest Nu The "Highest Nun	imber Previously F nber Previously Pa	aid For" IN TH iid For" (Total o	is SPACE r Indepen	is less tha dent) is the	n 3, enter "3." highest numb				x in co	lumn 1.			
500	A PTO-875 (Rev. 8,	(O1)	FORM PTO-875 (Rev. 8/01) Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE											

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number